Denver, CO 80261-0009



# **Overweight Vehicle Refund**

### Who qualifies:

Individuals or businesses who purchase a new 2010 or later vehicle with a GVW in excess of fifty-four thousand pounds (54,000) on or after July 1, 2011, and use this vehicle in interstate commerce.

## Complete all applicable items in each section.

#### Section 1:

Enter owner's name or business name, Colorado IRP account number, social security number, or federal ID number home or business address, and mailing address, if different from street address.

#### Section 2:

**Line 1:** Enter make, model, year, vehicle identification number (VIN), and date of purchase for the vehicle which you are requesting the refund.

Line 2: Enter Colorado sales tax paid, purchase price, mark if you purchased or leased the vehicle and the number of month of the lease when applicable. Only the 2.9% state sales tax is refundable, no local taxes are to be included in your request. If the refund is being requested on a leased vehicle include only state sales taxes paid during the calendar year

#### Section 3:

Sign and date the application, print the signer's name. Include job title when the refund is requested by a business.

The application must be accompanied by proof of payment of Colorado state sales and/or use taxes paid by the taxpayer associated purchase. Applications without the requested documentation will not be processed. Documentation includes:

- A copy of the purchase/lease agreement showing Colorado sales tax collected.
- Colorado vehicle registration showing sales tax collected.

Refunds are processed on a first-in first-out basis. Refunds will be issued until available allocated funds expire.

Last Name	First Name	First Name			dle Initial Colorado IRP Number	
Address		City			State	Zip
Mailing Address		City			State	Zip
Phone Number			Fax Number			
<b>Vehicle Information:</b> This mo	e Colorado regi		d registered in the Stat		ttach a co	opy of the
Make	Model			VIN		Year (YYYY)
Date of Purchase (MM/DD/YY)	Colorado Sales Ta	x Paid	Purchase Price	Purcha	se Date (MM/DD/YY)	
Lease Number			Months			
Applicant Certification: I cer correct and complete.	tify under penal	ty of perjury i	n the second degree the	hat the above sta	tements	are true
Signature of Owner or Corporate Officer				Date (N	MM/DD/YY)	
Name (please print)			Title (if applicable)			